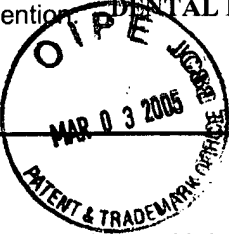
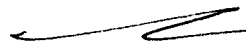
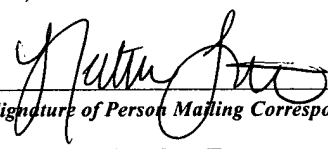


<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>115080-330</b>	
Applicant(s): <b>Cupp et al.</b>					
Application No. <b>10/037,941</b>	Filing Date <b>January 3, 2002</b>	Examiner <b>K. Hendricks</b>	Customer No. <b>29157</b>	Group Art Unit <b>1761</b>	Confirmation No. <b>7917</b>
Invention: <b>DENTAL DIET FOR REDUCING TARTAR</b>					
 <b>COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	33 -	33 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	9 -	9 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input checked="" type="checkbox"/> A check in the amount of <b>\$130.00</b> to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>02-1818</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>					
 _____ <i>Signature</i>			Dated: <b>February 28, 2005</b>		
<b>Robert M. Barrett (Reg. No. 30,142)</b> <b>Bell, Boyd &amp; Lloyd LLC</b> <b>P.O. Box 1135</b> <b>Chicago, Illinois 60690-1135</b> <b>Tel: 312/807-4204</b> <b>Fax: 312/827-8185</b>			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <div style="text-align: center;"> <b>02/28/05</b>          _____          (Date)       </div> <div style="text-align: center;">           _____  <i>Signature of Person Mailing Correspondence</i>  <b>Heather Foster</b>          _____  <i>Typed or Printed Name of Person Mailing Correspondence</i> </div>		
CC:					



**TRANSMITTAL LETTER**  
**(General - Patent Pending)**

Docket No.  
115808-330

In Re Application Of: **Cupp et al.**

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/037,941	January 3, 2002	K. Hendricks	29157	1761	7917

Title: **DENTAL DIET FOR REDUCING TARTAR**

COMMISSIONER FOR PATENTS:

Transmitted herewith is:

**Amendment transmittal letter (Duplicate); Amendment (9 pgs.); Terminal Disclaimer (2 pgs.); check in the amount of \$130.00; return receipt postcard.**

in the above identified application.

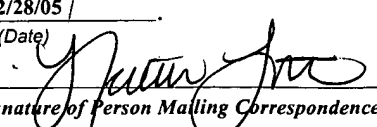
- ☐ No additional fee is required.
- ☒ A check in the amount of **\$130.00** is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. **02-1818** as described below.
- ☐ Charge the amount of
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.
- ☐ Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

*Signature*

Dated: **February 28, 2005**

**Robert M. Barrett (Reg. No. 30,142)**  
**Bell, Boyd & Lloyd LLC**  
**P.O. Box 1135**  
**Chicago, Illinois 60690-1135**  
**Tel: 312/807-4204**  
**Fax: 312/827-8185**

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02/28/05	(Date)
	
Signature of Person Mailing Correspondence	
Heather Foster	
Typed or Printed Name of Person Mailing Correspondence	

CC: